(Print Name of lobbyist)

PLEASE PRINT

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

for LOBBYISTS (RSA Chapter 15)

1

RECEIVED

JUL 26 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist(s | | Bouley | Alex | Kautrou | bas S |
|--|---|---|----------------------------------|--|--|
| II. Name of lobbyist's | nartnership, firm | or corporation, if | any: | | |
| Don | nah. & | Roulas | LL | .C. | |
| (Nam | e of partneyship, firm | or corporation) | 7 | | ••• |
| 17 1 | pot St. | #3 (Town/City) | Conc | Ord 1 | / H 0330/ |
| Business Address: (Str | æi) . 1/ ^ 1 | (Town/City) | | (State) | (2.1) |
| (63) 228- (Telephone) | 1601 (|)(F | ax) | e-mail | |
| III. This statement co reportable expense tr | vers: (Choose one ansactions which a | – file separate rep ire not attributab | orts for each le to any one o | client, OR you may lient). | y file a separate report for |
| All reportable trans | sactions occurring it | n the months prior | to the reporting | g date relative to the | following client: |
| Comm | unity S | upport / | Vetwo | ration Form) | |
| OR | (Full Name of Chen | t as it appears on the | Loody in regim | , | |
| ☐ All reportable trans | actions by the lobby ular client. | yist (including the | lobbyist's fami | ly), or the lobbying | firm listed below which are |
| | April 25, 2018 [| ו | In | ly 25, 2018 | |
| IV. Date of Report Reports cover: activ | ity from date of regist | | activity fr | com 4/1/18 to 6/30/18 | |
| · | October 31, 2018 activity from 7/1/18 to | | | nuary 30, 2019 🗌 irom 10/1/18 to 12/31/ | 18 |
| V. There have been If this box is checked, Concord, NH 03301. | no fees received complete just this fo | and no reporta | ble transacti o the Secretary | ons made since the of State's Office, S | ne last report. Grant House, Room 204, |
| VI. Check if addition | al reports are atta | ched: | | | |
| (NY If you have receive | ed fees or made ext | ocnditures, you mu | st file Addend | lum A- Fees and Ex | rpenses |
| Evnence Reimbursem | ent | | | | oort of Honorariums or |
| ☐ If you, your firm, | or your family has | made political con | tributions, you | must file Addendu | m C- Political Contributions |
| Sworn Statement/Af I have read RSA 15, I and complete to the b (Signature of lobbyis | RSA 15-B, RSA 14- cst of my knowledg | C and RSA 664 ar | nd hereby swea | or affirm that the f | Foregoing information is true |

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STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| 1. Name of Lobbyist(s) Jim Bouley Alex Ko | utroubas |
|---|--|
| II. Name of lobbyist's partnership, firm or corporation, if any: | |
| Dennehy & Bouley LLC (Name of partnership, firm or corporation) | |
| III. Name of Client Community Support Network 7 | mcpate 057/24/18 |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: | relations, or public relations services |
| a) Total of all fees received in this reporting period | a) \$ |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) | b) \$ // , 000, 00 |
| c) Total of all fees received to date (Add lines a and b) | 0)\$ 17,500-00 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported. | lient and if expenditures are made by nay be filed for the lobbyist(s)/firm aggregate total of all expenses paid penses; (b) the aggregate total of all e: meals purchased during a business is than \$10 that is given to the persor d with a value of \$25.00 or less); and rting period of greater than \$25.00 for e of greater than \$25, purchase of a r than \$25, but not greater than \$50 expense reimbursement, or politica |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) \$ |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | b) \$ |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ |
|--|--------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ |
| f) Total of all expenses year to date | f) \$ |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged. | |
| Paid to: | Amount: |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm | that the foregoing information |
| is true and complete to the best of my knowledge and belief. | |
| J& ly | 07/24/18 |
| (Signature of lobbyist) | (Date) |
| Jim Bouley (Print Name of Johnson) | |
| (Print Name of lobbyist) | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

| Sworn Statement/Affirmation by Lobbyist |
|---|
| Statement of Income and Expenses for: |
| Name of Lobbying partnership, firm, or corporation: Dennehy & Bouley LLC |
| Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any |
| particular client): Community Support Network Inc. |
| Date of Report (check one): |
| April 25, 2018 |
| I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): |
| Addendum A(s). |
| Addendum B(s). |
| Addendum C(s). |
| · |
| I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. |
| (Signature of lobbyist) On 24 18 (Date) |
| Alex Koutroubas |
| (Print Name of lobbyist) |